#### SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Volume 2, Issue 8 August 2003

Page 1 of 2



# FROM THE DESK OF THE DDSN MEDICAL CONSULTANT

**INSIDE THIS ISSUE:** 

# Recognition of Illness



Written by:
Graeme Johnson, M.D.
MEDICAL CONSULTANT
SCDDSN

3440 Harden Street Ext.
P.O. Box 4706
Columbia, SC 29240
PHONE:
(803) 898-9808
FAX:
(803) 898-9656
EMAIL:
gjohnson@ddsn.state.sc.us
EXTRANET:
http://web.ddsn.sc.gov



# RECOGNITION OF ILLNESS Part II

We are looking at ways we may recognize a person may be ill by noticing changes in that person. The person most likely to notice changes in a person is one who knows them best. When you are the caregiver of a consumer your observations are very important. Please discuss changes that worry you with your consumer's health care team. The changes may be due to changes in the consumer's surroundings (even things like high humidity in summer, a new staff member, a change in seating at the dining table) but we always need to consider if the person is ill. In our last issue we looked at some changes in appetite and appearance and in this issue we will look at other clues that may help us detect illness and be helpful.

## **Appearance**

We have mentioned the important signs of blueness and paleness. Blueness with any breathing problem is serious. If a person has become pale we need to consider that they may be ill. If they have pain or are less active than usual, then we need to check them promptly.

A person who is flushed may just have been exercising; however, we do need to check if they have had enough fluid. If they also have a fever then they need to be seen by a doctor or nurse. Persons with a rash and any other illness signs such as fever, cough, runny nose or eyes, or itchiness of the rash need to be checked. Many rashes are due to viruses present in the community and we do need to check if the person develops a rash and is on medication (particularly in the first two weeks on a new medication).

A person who has yellow "whites" of the eyes or yellow skin will need to be checked – especially if they also have vomiting or abdominal pain.

### **Behavior**

If we know a person well, we can see that they have changes in behavior as things change around them – for example: as they wait for the excitement of holidays or they cope with changes in their placement at the day program. However, we may also see changes that indicate that they have pain, upset, exhaustion or fever due to illness. These changes may be gradual or sudden. If a person, who is usually easy-going,

#### FROM THE DESK OF THE DDSN MEDICAL CONSULTANT

### Behavior (continued)

becomes very difficult and cross or a usually active person becomes very quiet, please check on them. Look for other possible changes such as those in sleep patterns, appetite, temperature, or presence of pain; then consult your health care team member to get help finding a cause and ways to help.

Persons on medication or for whom we have a Behavior Support Plan need to be observed well and changes in behavior need to be discussed with the team. Please remember that behavior change can indicate a health problem.

#### **Bowel and Bladder Habits**

Changes in patterns of toileting may be a signal of a problem and they need to be reported to your health care team. Watch for an increase or decrease of bowel or bladder habits.

Diarrhea with frequent passage of loose, liquid stools is a sign to notice. If an infant has three (3) or more stools within a 24-hour period, please call a doctor or nurse. If a child or adult has diarrhea for more than 24 hours, please report it and anyone with diarrhea who also has abdominal pain or fever needs to be checked. Please report any time a person has a bowel movement that is bloody.

If a person has a pattern of bowel movements that are hard, dry, or difficult to pass, this is called constipation and the person should be checked especially if it occurs with abdominal swelling or pain. Loss of bowel or bladder control (incontinence) needs to be investigated.

Bladder discomfort, increased frequency of passing urine, or pain when passing urine may be signs of a urinary infection and need to be discussed with your health professional. When a person has decreased frequency of passing urine or passes only a little amount of dark urine, this may be a sign of dehydration. Please report these changes as the person may require extra fluids. Ask for help if a baby does not pass urine for 4-6 hours or an older child or adult does not urinate for 10-12 hours.

These are some of the changes that we need to watch for; we will discuss more in the next issue. If in doubt, please ask for help and further advice.

(The preparation of this set of notes is based largely on the SCDDSN 1993 Handbook – Health Safety and Accountability.)

Changes need to be checked and reported:

- ✓ Pale
- ✓ Flushed
- ✓ Yellow
- ✓ Feverish
- ✓ Has rash

Changes in behavior

Change in bowel or bladder control:

- ✓ Diarrhea (particularly in babies)
- ✓ Constipation with pain or swelling
- ✓ Bloody bowel motion
- ✓ Reduced, dark urine